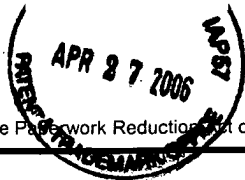APR 3 7 2006

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/725,018
Filing Date	December 1, 2003
First Named Inventor	Christopher A. Eusebi
Art Unit	3616
Examiner Name	Drew J. Brown

Total Number of Pages in This Submission		Attorney Docket Number	

ENCLOSURES *(check all that apply)*

- ☒ Fee Transmittal Form
  - ☒ Fee Attached
- ☒ Amendment and Petition for Extension of Time
  - ☐ After Final
  - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/ Incomplete Application
  - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☒ Replacement Drawing (2/7) – One Sheet (FIG. 2)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☒ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Technology Center (TC)
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to TC **(Appeal Notice, Brief, Reply Brief)**
- ☒ Assignment Papers (cover sheet and documents)
  name of Assignee: <u>C.E.E. Restraint Systems, Inc.</u>
- ☐ Status Letter
- ☒ Other Enclosure(s) *(please identify below)*:
  Copy of Change of Correspondence Address – Application originally submitted 10/25/04/; and postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name		Attorney Name Christopher A. Eusebi	Reg. No. 44,672
Signature			
Date	April 25, 2006		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Christopher A. Eusebi	Express Mail Label No.	
Signature		Date	April 25, 2006

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
for FY 2006

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($) $330.00

Complete if Known	
Application Number	10/725,018
Filing Date	December 1, 2003
First Named Inventor	Christopher A. Eusebi
Examiner Name	Drew J. Brown
Art Unit	3616
Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

☐ Charge any additional fee(s) or underpayments of fee(s)   ☐ Credit any overpayments
Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee ($)	Fee($)	Fee($)	Fee($)	Fee($)	Fee($)	Fees Paid ($)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee($)	Fee Paid ($)
_____ -20 or HP=	0	x _____ =	0

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims

Fee ($)	Fee Paid ($)
_____	_____

Indep. Claims	Extra Claims	Fee($)	Fee Paid ($)
_____ - 3 or HP=	0	x _____ =	0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ -	= 0	/ 50 = 0 (round **up** to a whole number) x	=	0

4. OTHER FEE(S)

	Fees Paid ($)
Two Month Extension of Time	$225.00
Other (e.g., late filing surcharge) : Terminal Disclaimer; $65.00; Recordation of Assignment $40.00	$105.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 44,672	Telephone	248 641-1600
Name (Print/Type)	Christopher A. Eusebi		Date	April 25, 2006